## FEDERAL COMMUNICATIONS COMMISSION Washington, DC 20554

Approved by OMB 3060-0076
Est. time per response: 1 hour

## COMMON CARRIER ANNUAL EMPLOYMENT REPORT se read instructions before completing and for Notice reporting public but

212121212				li ionac iona ii	ion action is bei	or compient	A direction two	instructions before completing and for Notice regarding public bulleting	מטווכ ממומפוו	_					
Name and Mailing Address of Respondent	espondent														
AndrewTelephone Company PO Box 8 La Motte, IA 52054	npany												Check has a char address.	Check here if this is a change of address.	
2. Year Report Filed 2017		3. Reporting Period (Ending Date of Pay Period Covered by Report)  01/31/2017	Reporting Period (Endi Period Covered by Rep	ing Date of Pa bort)	٧		4. Number of Reporting a. Fev	Number of Full-Time Employees during Selected     Reporting Period (check one):     Fewer than 16 (complete Sections I, IV, and V only)	ployees duri one): omplete Sect	ng Selected	V only)				
SECTION II - Full-Time Employees.	s.						5.	lo or more (complete all sections)	liete all section	ons)					
							Numi Report emplo	Number of Employees (Report employees in only one category)	/ees ne category)						
Job							_	Race/Ethnicity							
Categories	Hispa	Hispanic or						Not-Hispanic or Latino	c or Latino						Total
					Male	ile					Female	ale			Columns A - N
	Male	Female	White	Black or African American	Native Hawaiian or Other Pacific	Asian	American Indian or Alaska Native	Two or more races	White	Black or African American	Native Hawaiian or Other Pacific	Asian	American Indian or Alaska Native	Two or more races	-
	Α	В	С	D	Е	Ŧ	G	н	-	ر	7	٦	<	z	0
Executive/Senior Level Officials and Managers 1.1															0
First/Mid-Level Officials and 1.2 Managers															0
Professionals 2															0
Technicians 3															0
Sales Workers 4															0
Administrative Support 5 Workers															0
Craft Workers 6															0
Operatives 7															0
Laborers and Helpers 8															0
Service Workers 9															0
TOTAL 10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
PREVIOUS YEAR TOTAL 11															0

SECTION III - Part-Time Employees.	yees.															
								(Report employees in only one category)	yees in only o	yees one category)						
Job									Race/Ethnicity							
Categories		Hispanic or	or						Not-Hispanic or Latino	ic or Latino						Total
		Lamo				Male	le					Female	nale			Columns A - N
	Male		Female	White	Black or African American	Native Hawaiian or Other	Asian	American Indian or Alaska	Two or more races	White	Black or African American	Native Hawaiian or Other	Asian	American Indian or	Two or more races	
						Pacific Islander		Native				Pacific Islander		Native		
	A	_	В	С	D	Е	F	G	Ξ	-	ے	~	Г	Z	z	0
Executive/Senior Level Officials and Managers 1.	1.1			W 8.												0
First/Mid-Level Officials and 1.	1.2															0
Professionals	2			650												0
Technicians	ω															0
Sales Workers	4															0
Administrative Support Workers	5			8	8.											0
Craft Workers	6				2 <u>#</u>											0
Operatives	7															0
Laborers and Helpers	00															0
Service Workers	9															0
TOTAL 1	10 0		0	0	0	0	0	0	0	0	0	0	0	0	0	0
PREVIOUS YEAR TOTAL 1	11															0
SECTION IV - Report of Discrimination Complaints Pursuant to 47 CFR 22.321, 23.55, 90.168, 101.4, and 101.311.	ination C	omplain	ts Pursuar	t to 47 CFR	22.321, 23.5	5, 90.168, 101	.4, and 101.	311.								
This is to advise the Commission that no complaints regarding violations of the equal employment provisions of Federal, state, territorial, or local statutes have been filed against this company before any body having competent jurisdiction in such matters during the calendar year covered by this report.  This is to advise the Commission that the following complaints alleging violations of the provisions of any equal employment opportunity statute have been filed against this company. (Attach a list indicating parties involved, date filed, courts or agencies before which the matter has been heard, file number or other designation, and current status or disposition.	Commiss body hav Commiss ng parties	ion that n ring comp ion that the involved	to complain betent jurisd he following , date filed,	ts regarding iction in such complaints complaints	violations of in matters dur alleging viola	the equal empling the calendations of the prower which the ma	oyment prov ar year cover visions of ar tter has beer	isions of Federed by this reported by this reported by equal emptorn heard, file nu	ral, state, terri ort. yment opport mber or other	torial, or local unity statute of designation,	statutes have been file and current s	e been filed ag ad against this status or dispo	gainst this company.			
SECTION V - Certification  I certify that to the best of my knowledge, information, and belief, all statements in this report are true and correct	wledge, ir	nformation	n, and belie	f, all stateme	nts in this re	port are true ar	nd correct.									
	ped or Pri	inted Nan	Typed or Printed Name of Person Signing	n Signing			Signature			,			Telephone No.	9 9 9		
	0/ 1/1/1/1		Joining Organon		MITELLIA	EAI SE STATI	O O	mme.	Medi	aouch	BY FINIT AN		(202) /	(202) //3-2213		000
General Manager					OF ANY ST.	WILLI-ULLY FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (18 U.S.C. 1001) AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (47 U.S.C. 312 (A)(1) AND/OR FORFEITURE (47 U.S.C. 503).	E OR CON	STRUCTION F	PERMIT (47 U	UNISHABLE I.S.C. 312 (A)	(1) AND/OR	D/OR IMPRIS	ONMENT (18	03).	) AND/OR RE	VOCATION